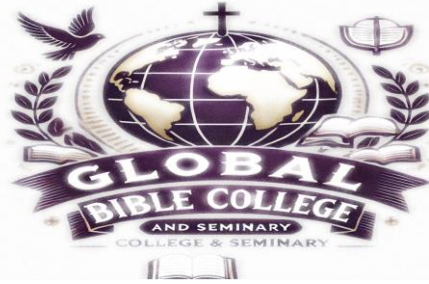


2200 N. State Street
 Bunnell, FL 32110
 (904) 478-1206

OR

2073 Palmetto Street, #482
 Middleburg, FL 32050



**ATTACH A RECENT
 PHOTOGRAPH
 HERE!!!
 APPLICATION WILL
 NOT BE PROCESSED
 WITHOUT PHOTO.**

Please print or type, and answer all questions.

STUDENT INFORMATION AND EVALUATION

| | | | | | |
|--|---------|--|---|--------------|--|
| TITLE (circle one): Mr. / Mrs. / Miss / Rev. / Other: | | | | DATE: | |
| LAST NAME: | | FIRST | | MIDDLE | |
| PHONE: (Home): Area Code Number | | (Work): Area Code Number | | | |
| ADDRESS: | | CITY: | STATE: | ZIP: | |
| e-mail address: | | | | | |
| HOW DID YOU HEAR OUR COLLEGE?: (circle one) Magazine / Friend / Associate / Newspaper / Television / Radio / Direct Mail / Yellow Pages / Other: | | | | | |
| DATE OF BIRTH: (Month/Day/Year) | | | SEX: (Circle One) Male Female | | |
| PLACE OF BIRTH: (City) (State) | | | SOCIAL SECURITY NUMBER: | | |
| U.S. CITIZEN?: (Circle One) Yes No | | | IF NOT, WHICH COUNTRY?: | | |
| (OPTIONAL) RACE: (Circle One) White / Black / Hispanic / Asian / Other: | | | MARITAL STATUS: Single Married Name Of Spouse: | | |
| NEAREST RELATIVE TO BE NOTIFIED IN CASE OF EMERGENCY: (Not Husband or Wife) | | | | Phone Number | |
| Name | | Relationship | | | |
| ADDRESS: | | CITY: | STATE: | ZIP: | |
| HEIGHT: | WEIGHT: | PLACE OF EMPLOYMENT: | | | |
| CHURCH BACKGROUND/DENOMINATION: | | | CHURCH ATTENDING/SERVING: PASTOR: | | |
| ADDRESS: | | CITY: | STATE: | ZIP: | |
| EXPERIENCE | | | | | |
| CURRENT STATUS IN MINISTRY: Licensed _____ Ordained _____ Denomination/Organization: _____ Pastor _____ Teacher _____ Evangelist _____ Missionary _____ Layman _____ Other: _____ | | | | | |
| NUMBER OF YEARS IN MINISTRY: | | AREAS OF INVOLVEMENT IN MINISTRY: Pastorate _____ Teaching _____ Evangelism _____ Radio/TV _____ Other: _____ | | | |

EDUCATION

BEGINNING WITH HIGH SCHOOL/SECONDARY SCHOOL, LIST ALL EDUCATIONAL INSTITUTIONS ATTENDED:

| NAME OF SCHOOL | DATES | MAJOR | DIPLOMA OR DEGREE |
|-----------------------|--------------|--------------|--------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

ARE YOU A HIGH SCHOOL GRADUATE? _____ **GED?** _____ **OTHER:** _____

COURSE ENROLLMENT INFORMATION

- Certificate of Ministry Program
- Associate of Biblical Studies Degree Program
- Bachelors of Theology in Biblical Studies Degree Program
- Masters of Theology in Biblical Studies Degree Program
- Doctor of Philosophy in Ministry Degree Program
- Doctor of Theology in Pastoral Leadership Degree Program
- Doctor of Ministry in Christian Education Degree Program

Preferred Start Date: (MM/DD/YYYY)

Enrollment Status

- Online
- On-Campus
- Both

- Preferred Days and Times for Teaching:

(Specify your availability, e.g., Wednesday evenings (on-campus), Online students – independent with professor guidance)

TESTIMONY

(A brief testimony about your relationship with Jesus Christ and how it began.)

Emergency Contact Information

- **Emergency Contact Name:**
(First Name, Last Name) _____
- **Relationship to You:**
(e.g., Parent, Spouse, Friend) _____
- **Emergency Contact Phone Number:**
(Primary Contact Number) _____
- **Emergency Contact Email Address:**
(Valid Email Address) _____

Payment Information

- **Payment Option:**
 Monthly Payment Plan Upfront Payment Plan
- **How do you plan to pay the course fees?**
 Credit/Debit Card PayPal (email – globalbiblecs2020@gmail.com)
 Check/Money Order (payable to Global Bible College and Seminary)
- **Would you like to be considered for any available discounts or scholarships if available?**
 Yes No Please send me more information

Agreement and Signature

By submitting this application, I understand that I am enrolling in courses at Global Bible College and Seminary for personal enrichment purposes only. I acknowledge that I will not receive a certificate or diploma for these courses. I also acknowledge that I opt-in to messaging. The opt-in information is stored in our customer management system. I agree to adhere to all group rules, policies, and procedures set forth by GBCS.

Signature: _____ **Date:** _____

*** Submit this completed application - Admin & Technology Fee (\$165) is required prior to first class. ***

- **Online:** Upload the form and pay online at www.globalbiblecollege.com/apply
- **Mail:** Send the form and payment to:
Global Bible College and Seminary
2073 Palmetto Street, #482
Middleburg, FL 32050
- **Scan:** Email form to: info@globalbiblecollege.com and go to www.globalbiblecollege.com to pay online.

For questions or assistance, please contact us at info@globalbiblecollege.com or call [\(904\) 478-1206](tel:9044781206).

We look forward to supporting your educational journey!

